

Communication: Human side of healthcare

Effective communication is the cornerstone of quality healthcare. It builds trust and mutual respect and strengthens personal relationships.

In an era of healthcare industrialisation, marketing and commercial targets have become priorities. Professional services must be delivered, but personal relationships cannot be ignored. Effective communication and friendly behaviour have a positive impact and contribute to better medical decision-making.

Communication is not the responsibility of doctors alone; it is essential for every member of the healthcare delivery system. Unfortunately, most healthcare personnel are not adequately trained in this area. Today, patients' relatives are often directed to doctors



tant but must be appropriate and honest.

Doctors should remain primarily focused on medical treatment, while other staff handle non-medical aspects of patient care. This can improve overall service.

Verbal communication is important, but it is not the only tool. Non-verbal communication can be equally effective:

accredits hospitals, has identified three important areas of communication:

- **Patient health literacy:** The ability to understand basic health information must be assessed.
- **Cultural understanding:** Strategies are needed to reduce racial and ethnic disparities in healthcare.
- **Language barriers:** Such barriers need to be addressed to ensure effective communication.

Gender and age can also influence communication styles, which should be customised accordingly. Text messages and online information can sometimes be useful. Nursing staff, in particular, should continually develop their verbal and non-verbal communication skills.

Some neurological patients and those with a tracheostomy cannot communicate verbally. They should be provided with alternatives such as pen and paper.

No patient should be deprived of the opportunity to communicate. Silence can be isolating.

A widely accepted but rarely practised method of confirming a patient's understanding is the "teach-back method". The patient is asked to repeat the information provided,

allowing healthcare workers to identify and clarify anything that has not been understood.

When surgery is planned, the surgeon should communicate clearly with the patient and family about:

- The exact indication and purpose of the surgery
- The procedure in detail
- The expected success rate
- Available alternative treatments
- Major risks and possible complications
- The risks of not undergoing surgery

Further queries should also be addressed. Such communication can prevent misunderstandings and resolve many concerns.

Many people suffer from "hospital phobia" — an intense fear of hospital admission. They may worry about infections, bad news or simply the unknown.

Previous negative experiences can intensify these fears.

Extreme fear of procedures such as blood collection, intravenous cannulation and biopsies is also common and is known as tomophobia.

Proper communication and counselling can help alleviate such anxiety.

Prolonged hospitalisa-

tion, irrespective of age, can lead to loneliness and social isolation. Patients often long for human connection. Physical isolation can also disrupt sleep patterns due to noise, low temperatures and changes in routine.

Communication therefore becomes particularly important during prolonged hospital stays. Patients may have only one or two family members visiting for limited periods. Neighbours, colleagues and friends can provide regular visits and logistical support, which need not always be financial. Such personal interaction can improve mental health outcomes.

When a patient's condition deteriorates, the family needs a clear understanding of the situation. A medical board comprising various specialists should communicate openly with family members.

Rising hospital bills alongside a deteriorating clinical condition can add to their distress. Clarity is essential.

In today's high-cost corporate healthcare system, insurance is necessary. People seek cost-effective insurance schemes but sometimes fail to disclose previous illnesses or habits.

Such communication failures can have serious consequences.

A doctor cannot declare a smoker to be a non-smoker or a diabetic patient to be healthy to facilitate an insurance claim. Miscommunication can result in claims being rejected.

Not every improvement in healthcare requires huge investment.

Sometimes, all that is needed is a change in approach and attitude.

HEALING POTION

GAUTAM MUKHOPADHYAY

even for non-medical issues. In Calcutta, communication in corporate healthcare needs improvement compared with some other states.

Communication is always bidirectional. Patients and relatives need to articulate their concerns clearly, while healthcare workers must understand and interpret them adequately. Patients' fears and concerns should be acknowledged, and correct information conveyed. Reassurance is impor-

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- A comforting touch, such as a handshake or pat on the shoulder, can help.
- A smile, a nod and eye contact can convey reassurance.
- Silence and active listening are important.
- Interrupting a patient should be avoided as it can signal a lack of respect.

Visual aids can also be useful in some cases. However, not all healthcare personnel are adequately trained in these methods. For many, healthcare has become just a job.

Quality communication can significantly improve patient satisfaction, quality of care and physical and mental health outcomes. The Joint Commission, which